

## Chris Aquino

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**From:** WMATC E-Filing <administrator@wmatc.gov>  
**Sent:** Wednesday, January 22, 2014 9:18 AM  
**To:** Chris Aquino  
**Subject:** 2014 Annual Report - WMATC No: 2042, Carrier Name: Sigma Corporation  
**Attachments:** 52dfd32edc3ba-WMATC Annual Report Vehicle List.pdf

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### Washington Metropolitan Area Transit Commission 2014 Carrier Annual Report Form

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#### FILING INFORMATION:

- Each carrier holding a WMATC certificate of authority on January 1, 2014, must file a complete 2014 annual report and pay a \$150 annual fee on or before **January 31, 2014**. To be timely, the report and fee must be received at WMATC's office by 4:30 p.m. (or submitted online by 11:59 p.m.) on that date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$150 late fee**. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **\$150 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 2, 2014.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

Read the accompanying instructions carefully before completing this form.

#### **1. ANNUAL REPORT OF:**

**WMATC No.:** 2042

**Name of Carrier (as shown on certificate of authority):** Sigma Corporation

**Trade Name:**

**Principal Place of Business**

**Street Address:** 225 S Whiting St

**Apt./Suite:** Apt 120

**City:** Alexandria

**State:** VA

**Zip:** 22304

**Mailing Address (if different from street address)**

**Street:**

**Apt./Suite:**

**City:**

**State:**

**Zip:**

**Telephone Number:** 2023594576

**Other Telephone:** 2023594576

**Fax Number:**

**E-mail:** [globetrace@yahoo.com](mailto:globetrace@yahoo.com)

**2. OTHER PASSENGER CARRIER AUTHORITY** (if applicable, list carrier/permit number):

**USDOT No.:**

**DCTC No.:**

**Virginia DMV passenger carrier No.:**

**Maryland PSC No.:** Virginia

**3. CARRIER CONTACT PERSON** (at mailing address to whom we should direct inquiries):

**Name:** yassir mohamed

**Title:** President

**Telephone Number:** 2023594576

**Other Telephone:** 2023594576

**Fax Number:**

**E-mail:** [globetrace@yahoo.com](mailto:globetrace@yahoo.com)

**4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS**

\*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see [www.wmatc.gov](http://www.wmatc.gov).

**Name of Registered Agent for Service of Process:** yassir

**Agent Address:** 225 S Whiting St.

**Apt./Suite:** 120

**City:** Alexandria

**State:** VA

**Zip:** 22304

**Telephone Number:** 2023594576

**E-mail:** [globetrace@yahoo.com](mailto:globetrace@yahoo.com)

**5. \*CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

**6. \*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below; **or** (2) upload a complete vehicle list to this form. Include **all** required information.

<b>Fleet No.</b>	<b>Year</b>	<b>Make</b>	<b>Vehicle VIN</b>	<b>License Plate</b>	<b>State</b>	<b>Seating Cap.</b>	<b>Wheel Chair</b>
					VA	Alexandria	

**\*Your vehicle list was attached to your submission.**

**7. \*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me and under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

**Name:** yassir mohamed

**Title:** President

**Date:** 01/22/2014



**Sigma Corp.**  
225 South Whiting ST  
Alexandria, VA 22304

Tel: 202-359-4576, e-mail: [globetrace@yahoo.com](mailto:globetrace@yahoo.com)

**Vehicle List**

**WMATC Carrier # 2042**

No.	Fleet No.	Year	Make	Vin	Plate	State	Seating	Wheel Chair
✓ 1	1	2007	Lincoln	1LNHM84W57Y628079	331 HAD	Virginia	5	NO
✓ 2	2	2007	Lincoln	1LNHM84W17Y632579	SGMA 24	Virginia	5	NO
✓ 3	4	2005	Lincoln	1LNHM81W05Y653032	558 HAD	Virginia	5	NO
✓ 4	5	2007	Lincoln	1LNHM81W67Y639368	557 HAD	Virginia	5	NO
✓ 5	6	2007	Lincoln	1LNHM84W77Y632991	566 HAD	Virginia	5	NO
✓ 6	7	2007	Lincoln	1LNHM84W87Y614175	594 HAD	Virginia	5	NO
✓ 7	8	2007	Lincoln	1LNHM81V07Y620323	H518317	Virginia	5	NO
✓ 8	9	2007	Chevy	3GNCC26K77G281902	H520513	Virginia	7	NO
✓ 9	11	2007	Lincoln	1LNHM84W97Y601385	551 37B	Maryland	5	NO
✓ 10	12	2008	Lincoln	2LNHM82W48X656007	H521131	Virginia	5	NO
✓ 11	13	2008	Lincoln	2LNHM82W68X659779	H521132	Virginia	5	NO
✓ 12	15	2008	Lincoln	2LNHM82VV98X635080	H521139	Virginia	5	NO
✓ 13	17	2008	Lincoln	2LNHM82W68X655814	H523054	Virginia	5	NO
14								
15								
16								